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THE URBAN DISTRICT COUNCIL OF SILSDEN

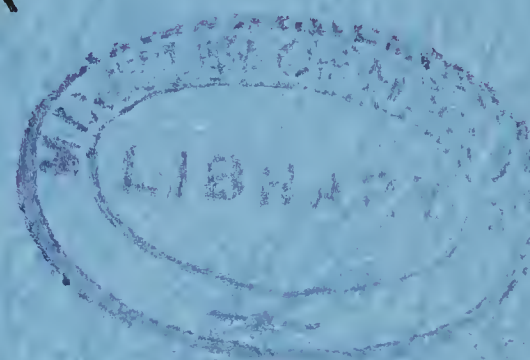
ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1954



BY

M. Hunter, M.B.E., M.D., D.P.H.

THE URBAN DISTRICT COUNCIL OF SILSDEN

A N N U A L R E P O R T

of the

MEDICAL OFFICER OF HEALTH

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by

M. HUNTER, M.B.E., M.D., D.P.H.

HEALTH COMMITTEE.

THE WHOLE COUNCIL

Chairman: H. Fortune Esq.

STAFF OF THE DEPARTMENT

Medical Officer of Health and
Divisional Medical Officer.

M. Hunter, M.B.E., M.D., D.P.H.

Sanitary Inspector.

W. Mitchell, A.R.S.I., M.S.I.A.

Clerk.

Mrs. N. Stevens.

Divisional Health Office,
19a, High Street,
Skipton.

To the Chairman and Members of the
Silsden Urban District Council.

Mr. Chairman, Ladies and Gentlemen,

I have pleasure in presenting for your information my Annual Report for the year 1954., this being the seventh report I have submitted to the Council. Included as an appendix is a report on the Local Health Authority's services in the West Riding County Council's No.1. Health Division which covers the urban districts of Silsden, Earby, Barnoldswick and Skipton, and the Skipton Rural District.

The Report deals mainly with environmental hygiene, as it has done for many years. And whilst the safety of water and food supplies, the control of infectious disease, housing, and schemes of drainage and sanitation retain their importance, the Appendix shows how greatly the scope of our work has widened in recent times. The emphasis now being placed on social medicine and the health and well being of the community as a whole is indicative of the change in outlook which has occurred.

I would like to thank the Chairman and Members of the Health Committee for their interest and assistance, and to record my appreciation of the loyal work of the Staff of the Department.

I am,

Your obedient Servant.

M. HUNTER

Medical Officer of Health.

SECTION A- STATISTICS AND SOCIAL CONDITIONS.

| | | | | | |
|--|-----|-----|-----|-----|---------|
| Area of the Urban District (acres) | ... | ... | ... | ... | 7,101 |
| Estimated population | ... | ... | ... | ... | 5,500 |
| Population at 1951 census | ... | ... | ... | ... | 5,820 |
| Number of inhabited houses (estimated) | ... | ... | ... | ... | 1,880 |
| Rateable Value for General Rate | ... | ... | ... | ... | £30,593 |
| Sum represented by a Penny Rate | ... | ... | ... | ... | £119 |

BIRTHS:

| | <u>Total:</u> | <u>Male:</u> | <u>Female:</u> |
|------------------|---------------|--------------|----------------|
| Live, legitimate | 81 | 35 | 46 |
| Illegitimate | 4 | 1 | 3 |

Total:

| | | |
|----|----|----|
| 85 | 36 | 49 |
|----|----|----|

| | | | |
|-------------------|-----|-----|-----|
| Still, legitimate | ... | ... | ... |
| Illegitimate | ... | ... | ... |

Total:

| | | |
|-----|-----|-----|
| ... | ... | ... |
|-----|-----|-----|

Total Births:

| | | |
|----|----|----|
| 85 | 36 | 49 |
|----|----|----|

BIRTH RATES:

| | | | | |
|--|-----|-----|-----|-------|
| Live Births (per 1,000 estimated population) | ... | ... | ... | 15.45 |
| Still Births (per 1,000 live and still births) | ... | ... | ... | - |

DEATH RATES

(crude)

(per 1,000 estimated population).

| | | | | | |
|------------------------------------|-----|-----|-----|-----|-------|
| All causes | ... | ... | ... | ... | 12.36 |
| Tuberculosis of Respiratory System | ... | ... | ... | ... | .36 |
| Other forms of tuberculosis | ... | ... | ... | ... | .18 |
| Respiratory Diseases | ... | ... | ... | ... | 1.45 |
| Cancer | ... | ... | ... | ... | 2.36 |
| Heart and Circulatory Diseases | ... | ... | ... | ... | 5.27 |

Death Rate of Infants under one year of age.

| | | | | | |
|-------------------------------------|-----|-----|-----|-----|----|
| All infants (per 1,000 live births) | ... | ... | ... | ... | 11 |
|-------------------------------------|-----|-----|-----|-----|----|

MATERNAL MORTALITY:

| | | | | | |
|---|-----|-----|-----|-----|---|
| Rates per 1,000 total (Live and Still) Births | ... | ... | ... | ... | - |
|---|-----|-----|-----|-----|---|

DEATHS:

Cause of Death.

| Disease | Males | Females | Total |
|---|-------|---------|-------|
| Tuberculosis Respiratory | 2 | - | 2 |
| Tuberculosis Other | 1 | - | 1 |
| Syphilitic Diseases | - | - | - |
| Diphtheria | - | - | - |
| Whooping Cough | - | - | - |
| Meningococcal Infection | - | - | - |
| Acute Poliomyelitis | - | - | - |
| Measles | - | - | - |
| Other infective and parasitic diseases | - | - | - |
| Malignant Neoplasm, stomach | 1 | - | 1 |
| Malignant Neoplasm, lung, bronchus | - | - | - |
| Malignant Neoplasm, breast | - | 1 | 1 |
| Malignant Neoplasm, uterus | - | 3 | 3 |
| Other Malignant and Lymphatic Neoplasms | 2 | 4 | 6 |
| Leukaemia, aleukaemia | 1 | 1 | 2 |
| Diabetes | - | - | - |
| Vascular lesions of nervous system | 4 | 4 | 8 |
| Coronary diseases, angina | 10 | 4 | 14 |
| Hypertension with heart disease | 2 | - | 2 |
| Other heart diseases | 2 | 10 | 12 |
| Other Circulatory diseases | - | 1 | 1 |
| Influenza | - | - | - |
| Pneumonia | 1 | - | 1 |
| Bronchitis | 4 | 3 | 7 |
| Other diseases of respiratory system | - | - | - |
| Ulcer of stomach and duodenum | 1 | - | 1 |
| Gastritis, enteritis and diarrhoea | - | - | - |
| Nephritis and Nephrosis | - | - | - |
| Hyperplasia of prostate | - | - | - |
| Pregnancy, Childbirth, Abortion | - | - | - |
| Congenital malformations | - | - | - |
| Other defined and ill-defined diseases | - | 1 | 1 |
| All other accidents | 1 | 2 | 3 |
| Suicide | 1 | 1 | 2 |
| Homicide and operations of War | - | - | - |
| | 33 | 35 | 68 |

COMMENTARY ON VITAL STATISTICS:

BIRTHS:

The birth rate shows little change, being 15.45 compared with 16.0 for the previous year, and is comparable to the national rate of 15.2.

DEATHS:

The death rate is rather higher this year with a figure of 12.36 compared with 10.91 for the previous year, but compares favourably with a rate of 11.3 for England and Wales.

INFANTILE MORTALITY:

A rate of 11 is a great improvement on last year's figure of 23, and is much lower than the rate of 25 for England and Wales as a whole.

There were no still-births in the district.

MATERNAL MORTALITY:

There were no deaths from puerperal sepsis or other maternal causes.

SECTION B:

PROVISION OF HEALTH SERVICES FOR THE AREA.

1. GENERAL:

The home nursing, midwifery, health visiting, home help, mental health and ambulance service are provided by the County Council and are described in the Appendix. Reference will also be found there to clinic arrangements, health education, vaccination and immunisation, and the school health service.

2. LABORATORY SERVICES:

There has been no change in the arrangements whereby the Medical Research Council's laboratories at Wakefield and Bradford provide a service for the examination of water, milk, ice-cream and a variety of pathological specimens. This is an excellent service, and the co-operation received of a high order.

3. HOSPITAL SERVICES:

Hospital organisation is no longer a local matter, and the services available to this area are provided by the Leeds and Manchester Regional Hospital Boards. The appropriate Hospital Management Committees are responsible for day to day administration, but are in nearly all respects subordinate to the Hospital Boards.

Essential details of the hospitals within or adjacent to the Divisional area are given in table form. The average cost per patient per week is also given in some instances, in the belief that these figures may be of interest to those who read this report. For it is the ever increasing cost of hospital treatment which is placing such a heavy financial burden on the National Health Service.

| Situation | Name | Purpose | Beds | Cost per week | | |
|----------------------|----------------------------|-------------------------------|----------|------------------|-----|----|
| | | | | £. | s. | d. |
| Burley-in-Wharfedale | Scalebor Park | Mental Illness | 323 | | | |
| Burnley | Victoria Hospital | General | 168 | | | |
| Burnley | General Hospital | General | 656 | | | |
| Burnley | Marsden Hospital | Infectious Diseases | 100 | | | |
| Burnley | Bank Hall Maternity | Maternity | 51 | | | |
| Colne | Christiana Hartley | Maternity | 16 | | | |
| Grassington | Grassington Chest Hospital | Diseases | 184 | 9. | 5. | 5. |
| Ilkley | Middleton Hospital | -do- | 376 | 8. | 18. | 5 |
| Ilkley | St. Winifreds Hospital | Maternity | 12 | | | |
| Keighley | Victoria Hospital | General | 143 | 16. | 2. | 2. |
| Keighley | St. John's Hospital | Long term sick | 258 | 8. | 0. | 2. |
| Keighley | Morton Banks | Maternity Infectious Diseases | 34 72 | | | |
| Menston | Menston Hospital | Mental Illness | 2,540 | 19. | 4. | 5 |
| Skipton | General | General | 64 | 15. | 7. | 3 |

- continued

| Situation | Name | Purpose | Beds | Cost per week | | |
|-----------|------------------------|----------------------|------|------------------|-----|----|
| | | | | £. | s. | d. |
| Skipton | Raikeswood Hospital | Long term sick | 182 | 7. | 1. | 0. |
| Skipton | Cawder Ghyll | Maternity | 18 | 20. | 7. | 6. |
| Settle | Castleberg Hospital | Mental Deficiency | 169 | 4. | 11. | 6. |

It should, however, be appreciated that many patients go direct to hospitals in Leeds, Bradford and elsewhere, in particular, those suffering from conditions in which treatment facilities are concentrated on a regional basis, e.g. neuro-surgical, genito-urinary, plastic surgery etc.

There has been no difficulty in securing accommodation for maternity patients, or cases of infectious disease. Accommodation for long term sick, particularly females, is often difficult to find in the winter months, but there is promise of developments which should lead to improved use of the available beds. In the meantime, the Health Department continues to supply information to assist in deciding the priority for admission. The smaller hospitals continue to be handicapped by difficulties associated with the availability of nurses and resident doctors, and to a lesser degree, domestic staff.

4. BLIND PERSONS:

There are 11 blind persons in the district. The Blind Persons Teacher exercises supervision and helps with their problems, and specialist examinations are carried out periodically by an ophthalmologist. The increasing proportion of old people is producing an increase in the incidence of blindness, much of it being due to cataract and glaucoma, but which is in some measure preventable by earlier diagnosis and treatment.

5. WATER SUPPLIES:

Mr. Wade, the Surveyor and Water Engineer has kindly supplied the following information:-

In consequence of the inclement weather no shortage of water was experienced during the summer, although the outflow from the Silsden reservoir was curtailed to conserve the supply during the summer period.

With regard to quality, the following samples of the raw and treated water have been submitted periodically for bacteriological examination to the Public Health Laboratories in Bradford.

Samples Submitted:

Results:

| | | |
|---------------------------------------|---|------------------------------------|
| 1 - raw water before treatment | - | unsatisfactory. |
| 12 - after treatment and chlorination | - | 7 satisfactory 5 unsatisfactory |

One sample was submitted for chemical analysis during the year, the report on which showed the water to be of moderate organic purity.

Plumbo-Solvency:

Six samples of water were submitted to the County Medical Officer for examination for plumbo-solvent action, the reports on which showed the lead content as follows:-

| | | |
|---|---|--------------------------|
| 4 | - | nil |
| 1 | - | 1/20th grains per gallon |
| 1 | - | 1/25th grains per gallon |

The number of dwelling houses now being supplied from the town's water mains is:-

| | | |
|----------------------------|---|--------|
| (a) direct to the houses | - | 1,806. |
| (b) by means of standpipes | - | None. |

The population being supplied is approximately 5,500.

The outlying parts of the district consisting chiefly of farm properties and including the hamlets of Brunthwaite and Swartha are not supplied from the town's mains, but have their own piped supplies.

Extension of Water Mains:

Extensions of water mains for housing development have been carried out during the year as follows:-

Sackville Road Estate:

| | | |
|------------------|---|-------------------------------|
| Sackville Road | - | 165 yards lin. 4" dia. mains. |
| North Dene Road | - | 136 yards lin. 4" dia. mains. |
| East Dene | = | 69 yards lin. 3" dia. mains. |
| West Dene | - | 101 yards lin. 3" dia. mains. |
| Hillcrest Avenue | - | 56 yards lin. 3" dia. mains. |

Renewal of Water Mains:

The renewal of existing mains have been carried out during the year as follows:-

| | | |
|-----------------------|---|---|
| <u>Highfield Lane</u> | - | 91 yards lin. old 2½" dia. mains replaced by new 3" dia. mains. |
|-----------------------|---|---|

During the past year attention has been drawn to a subject hitherto never mentioned in these reports. It is the fluoridation of water supplies which is already practised on a considerable scale in the United States of America, based on the knowledge that an appropriate concentration of fluorine in drinking water will greatly reduce the incidence of dental caries. Arrangements have been made for the addition of fluorine to the water supplies of certain towns in this country, and as the fluorine content of the Silsden water is but 0.4 parts compared with a recommended 1.0 parts per million, the results will be awaited with interest.

There appears to be no valid objections to this valuable piece of preventive medicine, and the cost is likely to be small.

6. FOOD HYGIENE:

Although there was no outbreak of food poisoning in the district during the year, this is a matter which still requires the closest attention. This is shown by reference to the cases reported in England and Wales in 1953., being the latest figures available at the time of writing, which show that the number of incidents (i.e., outbreaks and sporadic cases) was 5,277, being an increase of 1,758 over the previous year. 10,373 cases were notified, and there is evidence that at least 15,000 persons had symptoms; all preventable, no matter whether infection was due to salmonella, staphylococci or other organisms. 51 cases were fatal.

The foods implicated in outbreaks were similar to previous years, the most important being processed and made-up or re-heated dishes - pies, brawn, sandwiches, sausage, cold and pressed meat, stews and the like. Truffles, ice-cream, custard and cream buns again added their quota, followed by processed fish and duck eggs. Duck eggs are used extensively in this country, and as

many of them are infected they should never be eaten unless boiled for fifteen minutes, and used only in cooking where the food is subjected to prolonged heating at high temperatures after the eggs are added.

Although food poisoning is usually more inconvenient than serious, it is important as an indication of poor hygiene and inadequate or wrong use of refrigeration in kitchens and food factories. Exhortation and education are obviously not meeting with much success yet. But immediate improvement would result if customers refused food prepared in conditions known to be unhygienic and by methods known to be potentially dangerous.

7. ATMOSPHERIC POLLUTION:

The measurement of atmospheric pollution is undertaken by the County Council in conjunction with the Department of Scientific and Industrial Research, and three types of instrument are located at the Divisional Health Office. The deposit gauge measures the amount of deposited matter polluting the atmosphere, the lead peroxide instrument the amount of sulphur (SO_3) pollution, and the smoke filter the amount of suspended impurity.

The results of analyses with these instruments are shown in the following table:-

| Month. | Rainfall in in. | Total Solids deposited in tons per sq. mile. | Sulphur in ngns. (SO_3) per 100 sq. cms. per day. | Average daily suspended impurity in ngns. per cubic metre. |
|-----------|--------------------|---|---|--|
| January | 98 | 22.64 | 0.94 | 30.9 |
| February | 59 | 16.95 | 0.96 | 24.1 |
| March | 62 | 30.69 | 0.92 | 30.9 |
| April | 16 | 9.30 | 0.59 | 26.8 |
| May | 96 | 20.25 | 0.48 | 30.9 |
| June | 92 | 15.50 | 0.48 | 20.6 |
| July | 111 | 19.03 | 0.48 | 20.6 |
| August | 143 | 16.37 | 0.24 | 16.5 |
| September | 140 | 20.62 | 0.66 | 28.9 |
| October | 155 | 20.55 | 0.75 | 26.4 |
| November | 153 | 19.17 | 0.88 | 39.4 |
| December | 155 | 26.99 | 1.01 | 25.0 |

- continued

Measurement of atmospheric pollution on a national scale, based on observations from 150 stations, show an annual production of 2,400,000 tons of smoke - 1,290,000 tons from wasteful domestic fires, 700,000 tons from industry, 400,000 tons from railways and 10,000 tons from generating stations. In addition, 5,000,000 tons of sulphur dioxide, and 570,000 tons of ashes were produced.

Attention has again been focussed on this evil record by the Beaver Committee Report, which describes atmospheric pollution as "a social and economic evil of the first magnitude", estimated to cost the country £250 million per year, and to waste 10 million tons of coal.

The effect on health is considerable. "Smog" was responsible for 4,000 deaths in London in December 1952., and the death rates from bronchitis in this country are far higher than they are in Scandinavia and elsewhere. These are but two points. To get rid of this smoke would probably not cost more than the bill which the country pays annually (i.e., £250 million), and it is hoped that energetic steps will now be taken to implement the Beaver Committee's recommendations.

8. CREMATION:

The Skipton Urban District Council's crematorium was opened on the 30th May, 1952., and between that date and the end of 1954 over two thousand cremations have taken place. There is an increasing demand for this simple, complete, hygienic and reverent method of disposal of the dead; and as the half million people who die in Great Britain each year would require some 500 acres of land for burial, it is also an economic method.

The Medical Officer of Health is the medical referee to the Crematorium, assisted by a deputy as required.

9. NATIONAL ASSISTANCE ACTS, 1948 and 1951:

These Acts provide for the removal to hospital or other suitable place of persons suffering from grave chronic disease, or being aged, infirm, or physically handicapped are living in insanitary conditions, being unable to devote to themselves and not receiving from other persons proper care and attention.

It was not necessary to take action under these Acts during the year, it being possible to deal with such cases as came to notice by other methods.

SECTION C:

PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASE.

1. DIPHTHERIA:

Another year has passed without a case of diphtheria, but there are cases occurring in England and Wales every week, and it is important that the low incidence should not result in a false sense of security, to the neglect of immunisation. Further reference to this matter is made in the Appendix.

2. SCARLET FEVER:

This disease was prevalent, there being cases every month making a total of 48, compared with 16 and 19 in the preceding years. The usual steps were taken to exclude contacts, and to discover carriers, but the results were disappointing. Cases continued to be of a mild type, and so far as is known, without complications of any sort.

3. WHOOPING COUGH:

Only 1 case was notified compared with 3, 102, 33 and 85 in the four preceding years. Whether this reduction is due entirely to immunisation against this disease, it is not possible to state, but the consensus of medical opinion is that if whooping cough does occur it is certainly less serious in the child who has been immunised.

4. MEASLES:

This disease was also a rarity, there being only 2 notifications compared with 14, 181, 86 and 91 in the four preceding years.

5. PNEUMONIA:

41 cases were notified, compared with 33, 55 and 51 in the preceding years.

6. POLIOMYELITIS:

One case of the non-paralytic type occurred.

7. SMALLPOX:

No cases were notified, but the vaccination state is low throughout the whole country and the alarm which resulted from the epidemic in 1953 has been short lived. The demand for vaccination has fallen away proportionately, although at the time of writing this report an epidemic exists just across the Channel, in Brittany.

8. TUBERCULOSIS:

About a hundred years ago 65,000 deaths were caused by tuberculosis each year in England and Wales in a population of 20 millions. In 1939 the deaths numbered 25,600 with the population more than doubled, and since then there have been further falls to 10,585 in 1952 and 8,902 in 1953. This is satisfactory in so far as it goes and is attributable to some extent to sanatorium and surgical treatment, and the isolation of infectious patients, but to a larger extent to better standards of living - better nutrition, better housing, and better working conditions. Although it must not be forgotten that the tuberculosis death rate for those in the lowest social class still remains twice as high as for those in the highest social class. Tuberculosis is, therefore, a social evil which can and must be stamped out. It is, therefore, a matter for concern that although mortality is declining fast there is no diminution in the number of fresh notifications. It is believed that these notifications are mainly the result of more effective and earlier case finding, but there is another factor. That is the survival of cases who would have died in the days before effective drug treatment was available, but who now remain alive, in some instances in an infectious state, and in a position to disseminate the disease amongst their contacts. It would, therefore, seem that before the disease is abolished there is an intermediate stage in which patients are an increased burden on the welfare and curative sources, and this implies the need for intensification of the search for early cases, hitherto undiscovered sources of infection, and the reasonable segregation of the above chronic cases. The routine methods of preventive medicine are being applied with an additional measure introduced for the first time this year. This consists in obtaining parental consent for the application of a tuberculin test to each school entrant. The great majority of these children have not been infected with tuberculosis germs, and give a negative reaction. But a positive reaction implies infection, and now that most milk supplies are from tuberculin tested herds or pasteurised, examination of the child's family contacts is considered worthwhile. This is undertaken with the help of the Chest Physician, and has already shown results.

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In so far as this district is concerned, 6 cases of tuberculosis were notified during the year, compared with 8, 7 and 9 in the preceding years.

4 patients were admitted to tuberculosis hospitals, and 7 were discharged. 40 cases remained on the register at the end of the year. The waiting lists for admission to these hospitals have been greatly reduced of late. In fact, admission can now be secured in most instances almost as soon as treatment is offered.

Since 1948, the treatment of tuberculosis has been the responsibility of the hospitals and chest physicians, but the health authority's responsibilities are closely integrated in this area by the employment of health visitors in the chest clinics, and a monthly case conference where all relevant problems are discussed. This has proved to be of great value.

During the year arrangements were made for persons to be X-rayed who were taking up appointments in the Division involving contact with children, such X-rays now being obligatory, and all persons holding such positions were encouraged to attend the Mass Radiography Unit for an annual check.

B.C.G. Vaccine.

This is a form of inoculation similar to smallpox vaccination, and produces in the human body an artificially acquired resistance to the disease. It has been approved by the Chest Physician in all suitable cases, and although it is still uncertain whether it gives complete protection, and precisely how long the immunity lasts, there is no doubt that it reduces the risk of contracting tuberculosis.

In addition to the vaccinations performed by the Chest Physician, mostly in young children, B.C.G. vaccination has this year been offered to thirteen year old children, exhibiting a negative response to tuberculin tests. The principle is the same, but in this case aims at providing an immunity through adolescence, which is considered a dangerous age in respect of tuberculous infection. Details of this scheme are given in the Appendix to this report, in the School Health Service section.

Mass Radiography.

This service has been operating for ten years, and there are now seventy units in England and Wales examining some three million people each year. The aim of the service is the detection of early and symptomless cases of tuberculosis, and in general the yield of cases is highest in the age group 15 - 35., and amongst cases referred by general practitioners.

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A unit of the Leeds Regional Hospital Board visited Skipton in September, and a brief report of the findings is as follows:-

| | Males: | Females: | Total: |
|--|--------|----------|--------|
| 1. Examinations carried out: | | | |
| (a) Miniature X-rays taken | 711 | 791 | 1,502 |
| (b) Large X-rays taken | 22 | 18 | 40 |
| 2. Analyses of provisional findings: | | | |
| (a) Cases of active tuberculosis | 1 | 1 | 2 |
| (b) Cases of inactive " | 5 | 8 | 13 |
| (c) Other abnormalities | 11 | 6 | 17 |
| (d) Failed to reattend for large film | 1 | - | 1 |

This report is in respect of all people examined during the survey, and is known to include a considerable number of persons resident outside the town.

The numbers are too small to comment upon without reservation, but so far as the results go, 2 cases of active tuberculosis out of 1,502 people examined again compares favourably with an average national rate of 3.5 per 1,000

9. OTHER DISEASES:

Notifications were received in respect of erysipelas (3) and dysentery (4).

NOTIFICATIONS OF AND DEATHS FROM INFECTIOUS DISEASES:

| Disease Notified | AGE GROUPS | | | | | | | Age and un-known | Total cases notified | Cases adm. to hospital | Total Deaths |
|---------------------|------------|--------|--------|---------|----------|----------|-------------|------------------|----------------------|------------------------|--------------|
| | 0 to 1 | 1 to 3 | 3 to 5 | 5 to 10 | 10 to 15 | 15 to 25 | 25 and over | | | | |
| Scarlet Fever | - | 1 | 14 | 30 | 3 | - | - | - | 48 | 48 | - |
| Diphtheria | - | - | - | - | - | - | - | - | - | - | - |
| Acute Poliomyelitis | - | - | - | - | - | - | 1 | - | 1 | - | - |
| Measles | 1 | 1 | - | - | - | - | - | - | 2 | - | - |
| Whooping cough | - | 1 | - | - | - | - | - | - | 1 | - | - |

[illegible]

SANITARY CIRCUMSTANCES OF THE AREA.

RIVERS AND STREAMS:

The exceptionally high rainfall recorded during the year has resulted in many of the streams in the district being in spate for long periods. When this occurs there is a tendency for debris to accumulate in the water-courses, particularly in the lower reaches. This debris consists mainly of brushwood torn out of the banks by the heavy volume of water, and may cause a nuisance by the flooding of agricultural land, and sometimes damage to property, particularly boundary walls.

In one period of flood considerable damage was caused to the boundary wall at the sewage works when a section some forty yards in length was undermined and demolished by the Silsden beck which flows past the works.

Cases of pollution of streams have been few, but it was found that at one point sewage was gaining access to the Elliott Street beck due to a faulty foul sewer connection. This defect was remedied on discovery.

During the year there has been a growing tendency towards the installation of bathrooms and W.C.'s in farm houses in the outer district and where this work is carried out new septic tank and filter equipment is usually provided to replace defective cesspools. To this extent there has been an improvement in the cleanliness of streams as trouble is sometimes experienced with pollution from leaking cesspools.

From time to time a nuisance has occurred from pollution of the Elliott Street beck caused by foul sewage gaining access. Testing of foul sewers within the area has been carried out in an attempt to locate the source of the pollution. During the year it was found that a foul sewer serving several houses was wrongly connected to the surface water system, and since a re-connection was carried out no further nuisance has been experienced.

SWIMMING BATHS:

There are no public or private swimming baths in the area.

DRAINAGE, SEWERAGE AND SEWAGE DISPOSAL:

Several new sewerage schemes have been carried out during the year to provide connections for both council and private houses. The new estate at Sackville Road was opened for development and a comprehensive sewerage system constructed. When completed this site will consist of 136 houses and flats and sewers were provided on this basis.

A private bungalow in Bradley Road was the first house in a new estate to be developed by a local contractor for which layout plans were approved by the Council. Sewerage for the bungalow was by means of a new 9" sewer constructed by the contractor which will eventually provide a main outlet for the remainder of the houses on this estate.

Further development in the Skipton Road area resulted in a scheme being prepared for additional sewers in this area. The scheme provided for a substantial length of new sewer laid out in such a way as to provide sewerage for existing and future development in this area. Four houses now using separate septic tanks will be connected to the sewer, and two new houses at present under erection will also be connected. Since the scheme was prepared a further plot of land has been sold for development, and it is understood that four houses are contemplated. The scheme will also provide connection for this and future development in this particular area.

The exceptionally high rainfall recorded during the year has caused some difficulties with regard to sewage disposal, mainly on account of the large quantity of storm water on the sludge drying beds. This has prevented the stripping of one of the land beds for which provision was made in the financial estimates, and this work will have to be carried forward to the next financial year.

A description of the plant was included in previous reports, and no alterations were carried out during the year apart from minor works of maintenance.

Negotiations in connection with the trunk sewer scheme have continued throughout the year, and a new schedule of charges was agreed with Keighley Municipal Borough. As a result of this agreement a meeting was held between representatives of Skipton Rural District Council and this Council, and a basis for division of costs between the two authorities was agreed. At the same meeting it was decided to adopt the joint trunk sewer scheme in principle and the consultants, Messrs. J.H. Haiste and Partners, were instructed to prepare detailed estimates for further consideration.

SANITARY CONVENIENCES AND REFUSE ACCOMMODATION.

| | |
|---|-------|
| No. of water closets in premises incl. houses: | 1,759 |
| No. of waste water closets: | 350 |
| No. of pail or tub closets: | 11 |
| No. of privies at farms where no sewer and/or water supply is available. | 62 |

The following improvements were carried out during the year under the supervision of this Department:-

28 W.C's were provided in new houses.

18 W.C's were provided in existing houses.

Slow but steady progress is being made with the conversion of waste water closets to water closets as the number of bathroom and indoor W.C. installations continue to grow. The high cost of this work continues to be a serious deterrent, but it is anticipated that the Council's recent decision to consider such installations for improvement grant should have a beneficial effect on the rate of conversion.

There are still a number of ash pits in use throughout the district, some of them of a communal type and liable to nuisance, but towards the end of the period a further attempt was made to persuade owners to replace them with suitable bins, and no doubt advantage will be taken of the amended legislation on the subject to enforce the Council's wishes where the present persuasive methods fail.

SANITARY CIRCUMSTANCES OF THE AREA.

| <u>Summary of visits made during the Year.</u> | <u>Total.</u> |
|--|---------------|
| Water Supply | 25 |
| Drainage and Drain testing | 123 |
| Stables and Piggeries | 8 |
| Offensive trades (1 only - Fellmonger) | 2 |
| Hostel (Howden Hall) | 4 |
| Tents, Vans, Sheds | 17 |
| Factories with power | 32 |
| Factories without power | 4 |
| Outworkers premises | 6 |
| Bakehouses | 6 |
| Public Conveniences | 31 |
| Cinemas | 5 |
| Refuse Collection | 127 |
| Refuse Disposal | 24 |
| Rats and Mice Destruction Act | 125 |
| Snoke observations | 8 |
| Schools | 5 |
| Shops | 13 |
| Miscellaneous Sanitary Visits | 89 |
| Sewage Works | 81 |
| Building Licensing | |
| Visits to new buildings under erection | 329 |
| Council and Committee and Sub-Committee meetings | 62 |

- continued

HOUSING INSPECTION
PUBLIC HEALTH ACT:

| | |
|-----------------------------|-----|
| No. of houses inspected | 123 |
| Visits paid to above houses | 135 |

HOUSING ACT:

| | |
|-----------------------------|-----|
| No. of houses inspected | 97 |
| Visits paid to above houses | 118 |
| Overcrowding | 69 |

Verminous premises

| | |
|-----------------------------|----|
| No. of houses inspected | 12 |
| Visits paid to above houses | 36 |

Infectious Disease enquiries and disinfection

| | |
|--|-----|
| Miscellaneous housing visits including council house repairs | 310 |
|--|-----|

MEAT AND FOOD INSPECTION:

| | |
|---|-----|
| Visits to slaughterhouses | 104 |
| Visits to shops and stalls (unsound food) | 27 |
| Visits to Butchers shops | 15 |
| Fishmongers and Greengrocers | 8 |
| Dairies and Milkshops | 11 |
| Ice-Cream premises | 21 |
| Restaurant kitchens | 13 |
| Street hawkers and Vendors Carts | 2 |
| Public Houses | 6 |

Samples:-

| | |
|--------------|----|
| Ice-Cream | 12 |
| Iced Lollies | 4 |
| Milk | 12 |
| Water | 5 |

Notices served and complied with.

| | <u>Notices Served.</u> | | <u>Notices Complied with.</u> | |
|---|------------------------|----------------|-------------------------------|----------------|
| | <u>Informal.</u> | <u>Formal.</u> | <u>Informal.</u> | <u>Formal.</u> |
| Public Health Acts | 60 | 6 | 47 | 6 |
| Housing Acts | 46 | 4 | 43 | 2 |
| Factory Acts | 3 | - | 3 | - |
| Food and Drugs Act | 26 | - | 20 | - |
| Shops Act | - | - | - | - |
| Rats and Mice Destruction and Prevention of Damage by Pests Act | 2 | - | 2 | - |

HOUSING.

1. STATISTICS.

Number of dwelling houses in the District: 1,880

Number of back-to-back houses included in
above: 113

1. Inspection of dwelling houses during year:

(1) (a) Total number of dwelling houses
inspected for housing defects
(under Public Health or Housing
Acts) 123

(b) Number of inspections made for
the purpose: 135

(2) (a) Number of dwelling houses (incl.
under sub-head (1) above), which
were inspected and recorded under
the Housing Consolidated Regula-
tions: 69

(b) Number of inspections made for
the purpose: 69

(3) Number of dwelling houses needing action:

(a) Number considered to be in a state
so dangerous or injurious to health
as to be unfit for human habitation: 33

(b) Number (excl. those in sub-head (3)
(a) above), found not to be in all
respects reasonably fit for human
habitation: 46

2. Remedy of defects during the year without service of formal notices.

Number of defective dwelling houses
rendered fit in consequence of
informal action by the Local Authority
or their officers: 37

3. Action under Statutory Powers during the year.

A. Proceedings under Sections 9, 10 and 16, Housing Act, 1936:-

(1) Number of dwelling houses in respect of which notices were served requiring repairs: 4

(2) Number of dwelling houses which were rendered fit after service of formal notices:

(a) By owners 4

(b) By Local Authority in default of owners: Nil

B. Proceedings under Public Health Acts.

(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied. 3

(2) Number of dwelling houses in which defects were remedied after service of formal notices:-

(a) By owners 3

(b) By Local Authority in default of owners Nil

C. Proceedings under Sections 11 and 13 of the Housing Act, 1936:

(1) Number of representations, etc., made in respect of dwelling houses unfit for habitation: 2

(2) Number of dwelling houses in respect of which Demolition Orders were made: Nil

(3) Number of dwelling houses demolished in pursuance of Demolition Orders: Nil

(4) Any action under Sections 10 and 11 of the Local Government (Miscellaneous Provisions) Act, 1953? If so, what?.....Closing Orders on 2 dwellings.

D. Proceedings under Section 12 of the Housing Act, 1936.

(1) Number of separate tenements or underground rooms, in respect of which Closing Orders were made: Nil

(2) Number of separate tenements or underground rooms, the Closing Orders in respect of which were determined, the tenement or room having been fit: Nil

4. Housing Act, 1936- Part 1V-Overcrowding.

- | | |
|---|-----|
| (a)(1) Number of dwellings overcrowded at the end of the year: | 3 |
| (2) Number of families dwelling therein: | 5 |
| (3) Number of persons dwelling therein: | 21 |
| (b) Number of new cases of overcrowding reported during the year: | Nil |
| (c)(1) Number of cases of overcrowding relieved during the year: | 3 |
| (2) Number of persons concerned in such cases: | 13 |

NEW HOUSES:

5. Number of new houses provided during the year:-

| | | |
|--------------------------|----------------|-----|
| By the Local Authority:- | Permanent type | 21 |
| | Temporary type | Nil |
| By Private Enterprise | | 5 |

6. Housing Act, 1949

Any action in connection with:-

- | | |
|---|-----|
| (a) Section 4 - Advances for purpose of increasing housing accommodation? | Nil |
| (b) Section 20 - Grants to persons other than local authorities for improvement of housing accommodation? | Nil |

2. GENERAL CONDITIONS.

There are now 1,880 inhabited houses in the district, including 21 houses erected during the year by the Council and a further 5 erected by private persons.

Work on the 5th programme of 20 houses on the Dradishaw Road site continued and towards the end of the year these houses were becoming available for letting. At the same time the task of opening a new site at Sackville Road was commenced and roadworks and sewerage was carried out under the supervision of the Council's Engineer and Surveyor. A contract for 28 two bedroomed flats and 26 three bedroomed houses was arranged with Gregory Housing Ltd., and the work commenced during August.

In spite of the abolition of building licences only 5 houses were erected by private individuals during the year. Private builders within the district are apparently not yet prepared to build speculatively as the demand for new houses to purchase seems to be uncertain. It may be that the possibility of a Council house tenancy at a comparatively low rental deters some prospective house purchasers from making the necessary effort.

During the year a thorough examination of the list of housing applicants was carried out, and it was found that from a total of 104 applicants only 49 were in need of a house due to inadequate bedroom accommodation, and of these a further 6 neither resided or were employed in this district. From the remaining list of 43 applicants it was considered that 9 applicants could be regarded as unsuitable for various reasons, but it was found that 4 applicants were living in sub-standard accommodation although in these cases there was no actual shortage of bedroom accommodation. The investigation revealed, therefore, that the effective total number of applicants was 38 but to this figure should be added the number of families living in sub-standard accommodation where no application for a Council house has been made. It would appear, therefore, that the Council's current programme of 28 flats and 26 houses will be adequate to satisfy the current housing need for this district although final assessment of the true position is difficult as the state of the housing list alters continuously from day to day. By the end of the year excellent progress was being made with the Sackville Road houses, and no plans for additional schemes were under consideration.

During the year new houses and casual vacancies in existing property resulted in 33 families being re-housed by the Council.

Repair and maintenance of the Council's houses was carried out by this department, and a regular inspection of occupied houses was maintained. The annual tenants' garden competition was held once more, inspections by an independent adjudicator being carried out in July and September. These inspections revealed that the gardens are being improved year by year, and some are maintained in an excellent condition. There are, however, certain tenants who make little effort to tidy their gardens, and seem quite unconcerned about the bad effect of one untidy garden on those of their neighbours. During the year an effort was made to persuade these tenants to improve their gardens, and some results were obtained, although it was necessary for the Council to resort to eviction in two cases.

The sale of Council houses has proceeded slowly during the year, and so far 9 houses have been purchased by the tenants. Apart from one house erected during the War for the Ministry of Supply, all the other houses sold were built during the pre-War period. There seems to be no demand for the purchase of post-War houses.

As a result of the Housing Repairs and Rent Act, 1954., a preliminary survey of the district was carried out, and a provisional list of unfit houses was submitted to the Housing Committee. Recommendations regarding the method of dealing with the various properties were also made. By the end of the year action commenced by the preparation of a scheme for a clearance area, and by the scheduling of certain properties as individually unfit.

Several applications for improvement grant were made during the year, but no grants were actually made, the policy of the Council being to consider each application on its merits, and to make grants in cases where properties were likely to become unfit through lack of maintenance or improvement.

2. OVERCROWDING:

As previously reported 43 cases of overcrowding based on bedroom accommodation were known to exist at the end of the year, but of these only 3 were known to be cases of statutory overcrowding. 33 families were re-housed during the year.

COMMON LODGING HOUSES:

None in the district.

The Howden Hall Hostel owned by the National Hostels Corporation Limited was completely closed towards the end of the year, and the premises offered for sale.

INSPECTION OF FACTORIES:

| | <u>Inspections:</u> | <u>Notices Served:</u> | <u>Occupier Prosecuted:</u> |
|------------------------------------|---------------------|----------------------------|---------------------------------|
| Factories with mechanical power | 2 | Nil | Nil |
| Factories without mechanical power | 27 | 6 | Nil |
| Other premises under the Act | 3 | Nil | Nil |

Inspection of Factories - continued

DEFECTS FOUND IN FACTORIES:

| <u>Particulars.</u> | <u>Found.</u> | <u>Remedied.</u> | <u>No. of defects referred to H.M. Inspector.</u> | <u>No. of cases in which prosecutions were instituted</u> |
|--------------------------------|---------------|------------------|---|---|
| Want of cleanliness | 1 | 1 | - | - |
| Sanitary Conveniences: | | | | |
| (a) Insufficient | - | - | - | - |
| (b) Unsuitable or defective | 3 | 3 | - | - |
| (c) Not separate for sexes | 2 | 1 | - | - |
| Other offences against the Act | - | - | - | - |
| | <u>6</u> | <u>5</u> | <u>-</u> | <u>-</u> |

Some progress was made towards the issue of a new Certificate of Means of Escape in Case of Fire for the large tenement factory situated within the district operated by the Airedale Shed Co. Ltd. A plan of each floor of the factory showing all exits, hoists and staircases was prepared and a detailed inspection carried out with the assistance of the Fire Prevention Officer of the West Riding County Fire Services. A schedule of recommendations was drawn up and submitted to the factory owners, and most of the requirements were accepted and are now being carried out. Alternative proposals regarding certain alterations were submitted by the owners, and at the end of the year a report from the County Fire Officer was awaited.

It is anticipated that in the near future similar work in connection with other large premises in the district will commence.

OUTWORKERS:

4 notifications of outworkers were received during the period, and the premises concerned were inspected and found to be satisfactory. The trade concerned was textile mending. A letter was addressed to the local Manufacturers' Association requesting that the attention of members be drawn to the requirements of the Factories Act, 1937 in connection with the notification of outworkers.

MOVEABLE DWELLINGS:

As previously reported an established licensed site is situated within the district with accommodation for 50 caravans and chalets.

The site is essentially suitable for summer use only as it is situated in rather a remote position away from the shopping area. The improvements mentioned in the report for last year were completed, and these include the installation of a cesspool with proper drainage. The Council's refuse collection service was extended during the summer months to collect from the site and suitable receptacles were provided by the site owner.

There is one residential site situated in the inner district although the licence is restricted to one caravan. An application was received for a licence to extend this site for ten residential caravans, but this was refused on amenity grounds under the provision of the Town and County Planning Act, 1947.

ATMOSPHERIC POLLUTION:

No cases of atmospheric pollution were noted as a result of smoke observations carried out.

SUPERVISION OF FOOD PREMISES:

Routine inspection of premises concerned with the manufacture of all types of food was maintained throughout the year, and in some cases improvements to premises were carried out under the supervision of this department, notably the provision of better hand washing facilities and improved refrigerator accommodation.

Ice-cream manufacture is carried out in one large factory situated within the district, and these premises are subjected to regular inspection. The factory is well equipped with modern machinery and adequate accommodation for storage and refrigeration. The ice-cream produced is distributed over a wide area, and reports of samples taken by other authorities are being constantly received at this office. These results, together with the results of samples taken during the course of production indicate a high standard of cleanliness in the production methods.

Apart from this one producer, all other registrations are for sale and storage only, the majority of the premises concerned being small mixed businesses where wrapped ice-cream only is sold. All premises are equipped with a refrigerated conserver designed specially for the purpose, and in every case the more well known brands of ice-cream is sold.

The number of premises concerned with production and sale of food is as follows:-

| | |
|------------------------------|----|
| Grocers and Mixed Businesses | 21 |
| Greengrocers | 5 |
| Fish Retailers | 5 |
| Fried Fish Shops | 4 |
| Butchers | 10 |
| Bakers and Confectioners | 10 |
| Restaurants and Cafes | 1 |
| Milk Bar | 1 |
| Sweets and Confectionery | 4 |
| Ice-Cream Manufacturer | 1 |
| Iced-Lollie Manufacturer | 1 |
| Milk Retailers | 6 |
| Licensed Premises | 6 |

Premises registered under Section 14., Food and Drugs Act, 1938:-

| | |
|--|----|
| Manufacture of Ice-Cream | 1 |
| Sale and storage of Ice-Cream | 15 |
| Preparation or manufacture of sausage or potted, pressed, pickled or preserved food intended for sale | 16 |
| Dairies registered under Milk and Dairies Regulations 1949 | 2 |

During the year 113 visits were paid to food premises of all types apart from visits to slaughterhouses for meat inspection purposes. Conditions generally were found to be reasonably satisfactory, although there is always scope for improvement. During the visits the impression is gained, that in the grocery trade in particular, the bulk of the stock in hand seems to increase annually with the result that some shops are short of the elbow-room so necessary if ideal conditions are to be maintained.

MEAT SUPPLY:

Early in the year consideration was given to the Government's proposals regarding the marketing of fat stock, and to the Interim Report of the Interdepartmental Committee on Slaughterhouses. A meeting between the Council and members of the meat trade was arranged, and the matter discussed fully. Prior to this meeting, enquiries revealed that surplus accommodation for slaughtering existed at the public abattoirs in Skipton and Keighley, but at the meeting there seemed to be little desire among the local tradesmen to make use of these facilities.

It was suggested by the traders concerned that this Authority should provide a suitable abattoir but, in view of the recommendations set out in the report on this subject, the suggestion was not considered at any length. The Council decided, however, that premises, formerly used as slaughterhouses if brought to a satisfactory standard would receive favourable consideration for the issue of a licence for the period set out in the amending legislation.

By the time control of meat supplies ceased three such licences had been issued and private slaughtering commenced once more within the district. The work is carried out in the early part of the week, and in a short time the system of notification and inspection was operating smoothly and there appeared to be no reason to suspect that full compliance with the regulations was not being observed.

The total number of animals slaughtered in the three licensed premises varies slightly from week to week, but seems to average about 5 beasts, 10 sheep and 12 pigs with an occasional calf. It will be seen, therefore, that only a proportion of the meat retailed in the district is slaughtered locally, and enquiries revealed that several butchers purchase their meat from wholesalers in Skipton or Keighley, although one trader carries out his slaughtering at Skipton abattoir.

Throughout the year the meat produced from animals slaughtered locally was of a very high quality and the incidence of disease was low. Details of condemnations made are as follows:-

| | |
|--------------------|---------|
| Actinomycosis | 54 lbs. |
| Multiple Abscesses | 32 lbs. |
| Tuberculosis | 87 lbs. |
| Distomatosis | 49 lbs. |
| Extensive Bruising | 30 lbs. |

All condemned meat was disposed of locally under the supervision of this department, although arrangements were made with a contractor approved by Keighley Corporation for the disposal of a substantial amount of meat should the necessity arise. By the end of the period no use had been made of these facilities.

MILK SUPPLY:

For the greater part of the year the distribution of milk within the district was in the hands of three producer retailers and two retailers, but later in the year a further producer was registered by the Ministry of Agriculture and Fisheries for the retailing of milk.

Retail sampling of milk in course of delivery to consumers was carried out by this department and further sampling of milk produced in this district and despatched in bulk to a dairy in Leeds was carried out by Leeds Corporation. As a result of unsatisfactory samples it was necessary to take action under Section 20 of the Milk and Dairies Regulations in one case.

The results of samples taken by this department are as follows:-

| <u>MILK SAMPLING:</u> | <u>Grade.</u> | <u>Satisfactory.</u> | <u>Unsatisfactory.</u> |
|-----------------------|-------------------|----------------------|------------------------|
| | Tuberculin Tested | 10 | - |
| | T.T. Pasteurised | 2 | - |
| | Pasteurised | 2 | - |
| | Biological Test | 5 | - |

OFFENSIVE TRADES:

Only one offensive trade is carried on within the district, that of a fellmonger. The premises are modern and well equipped, and the business is conducted in a satisfactory manner.

RODENT CONTROL:

This work has continued throughout the year, and a satisfactory control has been maintained by a part-time operative. Maintenance treatments of the sewerage system was carried out under the supervision of the Officers of the Ministry of Agriculture and Fisheries, and the methods employed are those recommended by this Ministry.

A summary of this work is set out below:-

| | <u>Local Authority.</u> | <u>Dwelling Houses.</u> | <u>Agricultural.</u> | <u>All Others.</u> |
|----------------------------|-------------------------|-------------------------|----------------------|--------------------|
| No. of premises inspected: | 14 | 149 | 27 | 17 |
| No. of premises treated: | 4 | 61 | 9 | 9 |

Treatment of business premises is carried out on a repayment basis.

PUBLIC CLEANSING:

This department is concerned only with the collection and disposal of refuse, the Highways Department being responsible for snow clearance, street gritting and sweeping.

Refuse collection is carried out by means of a 7 cubic yard collection vehicle with a driver and 3 loaders, and for some time now it has been necessary to supplement the permanent organisation with additional staff and hired haulage. One of the difficulties experienced in the past was the unsuitability of the vehicles available for hire as they are usually of the platform type with high sides but no top cover. Such a vehicle is uneconomical when employed on refuse collection as the height of the platform above the ground makes it necessary for one man to stand on the platform to assist the loaders to lift the full bins to the loading height. In addition, the work can only proceed on comparatively windless days in areas near to the refuse tip due to the lack of suitable covers on the hired vehicle.

There can be no doubt that the quantity of refuse requiring removal increases annually due partially to the addition of new houses to the round, and also to the increased production of refuse by householders, generally caused by the growing use of tinned foods and the continuous night burning grate. It seems likely, therefore, that the use of hired haulage will be a permanent feature of the refuse collection service until such time as the purchase of an additional vehicle can be justified.

It was decided to approach the neighbouring authorities to ascertain whether a more suitable vehicle was available for hire, and an arrangement was made with Skipton Urban District Council for the hire of a 7 cubic yard collector for use in this district for two days each fortnight. With the aid of the additional vehicle, which is manned by this Council's staff, it has been possible to maintain a weekly collection in the central shopping area with a 10 - 12 day collection throughout the remainder of the district. When weather conditions were favourable it was possible, on occasions, to maintain a weekly service throughout the district.

Refuse disposal is carried out at the sewage disposal works situated at Keighley Road, where controlled tipping is the method employed. The salvage of waste paper and heavy scrap metal continued throughout the year, and the income from salvage of all types showed an increase over the previous year due to increased collection and increased market value.

PROBABLE EXPENDITURE ON SCAVENGING 1954 - 55.

Expenditure.

Vehicle Expenses.

£

Licences and Insurance

58

Repairs

40

Petrol and Oil

106

Depot

25

Other Expenses.

Wages

1,860

Bonus re Salvage

44

Superannuation

147

National Insurance

78

Own Mechanical Haulage

-

Hired Mechanical Haulage

99

Materials, General Maintenance and Repairs

14

Baling Wire

16

Overalls and Gloves

8

Bradley Road Tip

-

Dustbins and Refuse Baskets

1

2,496

Loan Charges.

Interest

15

Loan Repayment

124

2,635

Income.

Tipping, Rents, etc.

19

Sale of Salvaged Materials

362

381

Rate requirement £2,254

WEST RIDING COUNTY COUNCIL.

DIVISION NO.1.

ANNUAL REPORT OF THE DIVISIONAL MEDICAL OFFICER
FOR THE YEAR 1954.

CONTENTS.

1. General Description
2. Staff
3. Health Centres
4. Care of Mothers and Young Children
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6. Home Nursing
7. Health Visiting
8. Home Help Service
9. Mental Health Service
10. Vaccination and Immunisation
11. Health Education
12. Children neglected or ill-treated
13. Care and After Care
14. Ambulance
15. School Health Service
16. Medical Examinations

1. GENERAL DESCRIPTION.

The Division consists of the following districts:-

| | Ø. <u>Population</u> | <u>Area in Acres</u> |
|-----------------------------|----------------------|----------------------|
| Silsden Urban District | 5,820 | 7,101 |
| Earby Urban District | 5,348 | 3,519 |
| Barnoldswick Urban District | 10,282 | 2,764 |
| Skipton Urban District | 13,210 | 4,211 |
| Skipton Rural District | 23,715 | 146,071 |

Ø (Registrar General's Preliminary Report on the 1951 Census).

Social conditions in this mixed urban and rural community changed little during the year. Such changes as occurred were beneficial, being attributable to full employment with a corresponding rise in the standard of living, and improved housing conditions. But although much has been done to improve the latter, much remains to be done; and it is hoped that full advantage will be taken of the provisions of "The Housing Repairs and Rents Act, 1954" to secure the demolition or improvement of substandard property which remains. Farming, one of the most important occupations, had a difficult year. For the shortage of farm labour persisted, and the hay crop was gathered under most adverse conditions in a period of bad weather, unparalleled in the last fifty years.

2. DIVISIONAL STAFF: as at 31st December, 1954.

| | |
|----------------|--|
| M. Hunter. | M.B.E., M.D., D.P.H. Divisional Medical Officer. |
| C. Harris. | M.B., B.Ch. Assistant County Medical Officer. |
| R.R. Stoakley. | M.B., B.Ch. Assistant County Medical Officer. |

NURSING.

(a) Divisional Superintendent Health Visitor.

Miss F. Stevenson S.R.N., S.R.C.N., C.M.B., Part 1. H.V.

(b) Health Visitors/School Nurses.

Miss M. Birdsall S.R.N., C.M.B. Part 1. H.V.

Mrs. D. Crabtree S.R.N., S.C.M., H.V.

Mrs. A.M. Dickinson S.R.N., S.C.M.

Miss N. Easton S.R.N., S.C.M., H.V.

Miss R.E. Fawcett S.R.N., S.C.M., H.V.

Miss I. Fell S.R.N., S.C.M., H.V.

Miss M. Smith S.R.N., S.C.M., H.V.

Mrs. I.G. Roscow S.R.N.

Mrs. B. Roberts S.R.N., S.C.M.

Miss M. Whaley S.R.N., S.C.M., H.V.

Miss N. Williams S.R.N., S.C.M., H.V.

(c) Home Nurses.

Mrs. V.M. Flynn S.C.M., S.E.A.N.

Mrs. H.C. Hill S.R.N., S.C.M.

Mrs. I. Molyneux S.R.N., S.C.M.

Mrs. M. Parkinson S.R.N.

Mrs. M. Pratt S.R.N.

(d) Home Nurse/Midwives.

Miss M. Brown S.R.N., S.C.M.

Miss E.M. Butler S.R.N., S.C.M.

Miss P.J. Crompton S.R.N., S.C.M.

Miss C. Herbert S.R.N., S.C.M.

Mrs. D. Inman S.R.N., S.C.M.

Mrs. E.M. Lingard S.R.N., S.C.M.

Miss P.M. Oversby S.R.N., S.C.M.

(e) Home Nurse/Midwives/Health Visitors.

Mrs. P.M.E. Bunnett S.R.N., S.C.M.

Miss A.M. Hunter S.R.N., S.C.M.

Mrs. B.A. Priestley S.R.N., S.C.M., H.V.

(f) Midwives.

Miss E. Barlow S.C.M.

OTHER STAFF.

Ø Mental Health Social Worker.

Mrs. J. Barber S.R.N., S.C.M.

Ø Home Teacher (Under Mental Deficiency Act).

Miss M.E. Marshall. M.A.

Ø Venereal Diseases Social Worker.

Mrs. Doige-Harrison.

Ø Speech Therapist.

Miss M. Buckley., L.C.S.T.

Ø (Part time in Division 1).

DAY NURSERY STAFF.

| | |
|---------------------|---|
| Matron | 1 |
| Nursery Assistants | 2 |
| Cooks and Domestics | 2 |

ADMINISTRATIVE AND CLERICAL STAFF.

| | |
|------------------------------|---|
| Administrative (Chief Clerk) | 1 |
| Clerical | 8 |

HOME HELP STAFF.

| | |
|-----------|----|
| Full time | 15 |
| Part time | 30 |

OTHER DOMESTIC STAFF.

| | |
|-----------|---|
| Part time | 3 |
|-----------|---|

The Division has again been fortunate in having a full complement of staff throughout the year, helped no doubt, by a favourable geographical position. Calls upon the staff, particularly the home nurses, have at times been heavy; but thanks to their willing co-operation all demands have been met.

It is gratifying to report that co-operation between the three branches of the Health Service - hospitals, general practitioners and local health authority, shows some signs of improvement, after a period of six years when all our efforts appeared to be in vain. A great deal more can be done in this direction, and it must be done if the general public is to receive the full benefits from this most costly Health Service. A Service which seems to have measured its progress by a yearly increase in the numbers of patients, hospital staffs, beds and drugs, and to have no policy except an arbitrary financial "ceiling", for reducing the annual bill for ill-health.

3. HEALTH CENTRES.

The establishment of Health Centres was to be one of the main features of the National Health Service, and their provision would certainly improve co-operation, help the patients by saving their time, and in the long run would likely reduce the total cost. But they are expensive to build, and instead of their being numbered in hundreds there are still less than ten in the country. Furthermore, there appears to be a reluctance of the medical profession for their establishment, which did not previously exist. Group practice appears to be the alternative, and the Minister of Health is reported to have said that this offers more promise for the future. It may well do so for the general medical practitioners, but unfortunately the patient cannot arrange his illnesses and accidents to coincide with his doctor's presence, and he may be seen by up to half a dozen doctors, particularly during holiday periods. He does not seem to find this entirely satisfactory, and it becomes increasingly difficult to reconcile the concept of the family doctor, - the erstwhile guide, counsellor and friend - with the large group practice.

In the absence of health centres we continue to use various types of rented premises for the local health authority services. Most of these are unsuitable and involve the staff in a wastage of time and effort. But we have been using them for years, and the services are generally well patronised despite the unattractiveness of the surroundings.

4. CARE OF MOTHERS AND YOUNG CHILDREN.

(a) BIRTHS:

Public Health Act, 1936 - Section 203.

Return of births notified in the Divisional Area during the period 1st January - 31st December, 1954.

| Details. | Domiciliary | | Institutional | | Total. |
|-----------------------------------|-------------|--------|---------------|--------|--------|
| | Live. | Still. | Live. | Still. | |
| (a) Primary Notifications | | | | | |
| (i) Urban Districts | 66 | 1 | 275 | 8 | 350 |
| (ii) Rural Districts | 60 | - | 238 | 2 | 300 |
| (b) Add Inward Transfers: | 4 | - | 241 | 7 | 252 |
| (c) Total Notifications received: | 130 | 1 | 754 | 17 | 902 |
| (d) Deduct Outward Transfers | - | - | 61 | - | 61 |
| (e) Total Adjusted Births | 130 | 1 | 693 | 17 | 841 |

Analysis of Institutional Births:

Born in (a) Hospitals:

(b) Maternity Homes:

(c) Nursing Homes:

Total:

| | |
|-----|----|
| 689 | 17 |
| 1 | - |
| 3 | - |
| 693 | 17 |

(b) ANTE-NATAL CLINICS

| Name and address of Ante-Natal Clinic (whether held at Infant Welfare Centre or other premises). | No. of sessions now held per month. | | No. of women in attendance. | | Total No. of attendances made by women during year. | |
|--|--|-----------------------|---|-----------------------|--|------------------|
| | Combined with I.W. | Separate Sessions. | No. of women who No. of attended new cases during included year. in Col. 5. | Combined with I.W. | Doctors | Midwives only |
| Barnoldswick Methodist Hall, Mosley Street | - | 4 | 125 | 107 | 528 | 1 |
| Farby Old Grammar School | - | 2 | 58 | 43 | 274 | 1 |
| Glusburn Ebenezer Sunday School | 1 | 2 | 26 | 19 | 133 | 1 |
| TOTALS: | 1 | 8 | 209 | 169 | 935 | 1 |

(c) INFANT WELFARE CENTRES.

| Name and Address of Centre. | No. of Infant Welfare Sessions now held per wth. | No. of children who first attended a Centre of this Local Authority during yr. and who at their first attendance were under 1 yr. of age. | No. of children who attended during yr. and who were born in 1954. 1953 1952-49 | Total No. of children who attended during yr. | No. of attendances during yr. made by children who at date of attendance were: Under 1 but 2 but 1 yr. under under 2. 5. | Total attendances during yr. |
|---------------------------------|--|---|---|---|--|------------------------------|
| Barnoldswick Methodist Hall | 8 | 129 | 112 108 148 | 368 | 1612 451 392 | 2456 |
| Farby Old Grammar School | 4 | 59 | 52 66 41 | 159 | 1088 340 214 | 1642 |
| Gargrave Institute | 2 | 29 | 28 18 47 | 93 | 328 196 223 | 747 |
| Glusburn Fbeneezer Sunlay Schl. | 4 | 80 | 67 54 39 | 160 | 1101 226 163 | 1490 |
| Crassington Church Fouse | 2 | 28 | 25 26 24 | 75 | 306 270 157 | 733 |
| Silsden Kirkgate S.Sch. | 4 | 80 | 69 55 47 | 171 | 804 167 99 | 1070 |
| Skipton Millfields Hall | 12 | 125 | 104 129 173 | 406 | 2006 599 584 | 3189 |

(d) MOBILE CLINICS.

| Name and Address of Centre. | No. of Infant Welfare Sessions now held per mth. | No. of children who first attended a Centre of this Local Authority during yr. and who at their first attendance were Under 1 yr. | No. of children who attended during yr. and who were born in:- | | | | Total No. of children who attended during year. | No. of attendances during yr. made by children who at date of attendance were: | | | Total attendances during yr. |
|-----------------------------|--|---|--|------|---------|----|---|--|----------------|----------------|------------------------------|
| | | | 1954 | 1953 | 1952-49 | | | Under 1 yr. | 1 but under 2. | 2 but under 5. | |
| Addingham | 2 | 24 | 17 | 13 | 11 | 41 | 242 | 20 | 56 | | 318 |
| Bradley | 2 | 7 | 6 | 15 | 9 | 30 | 34 | 18 | 8 | | 60 |
| Carleton | 2 | 9 | 9 | 19 | 23 | 51 | 97 | 113 | 23 | | 233 |
| Cononley | 2 | 8 | 8 | 14 | 18 | 40 | 72 | 113 | 95 | | 280 |
| Cowling | 2 | 19 | 18 | 14 | 21 | 53 | 231 | 57 | 65 | | 353 |
| Lothersdale | 2 | 2 | 2 | 3 | 3 | 8 | 9 | 13 | 10 | | 32 |

(e) CARE OF PREMATURE INFANTS.

A premature infant is defined as one weighing $5\frac{1}{2}$ lbs. or less at birth, irrespective of the period of gestation. 57 premature infants were born in the Division during the year, some of which were transferred to childrens hospitals for treatment. Special equipment is kept for use on the midwife's request when premature infants are to be nursed at home.

(f) DAY NURSERIES.

As a result of a change in the policy for admission, the Earby Day Nursery was closed during the year, and those children who were eligible were offered places at the Barnoldswick Nursery. This change in policy has also affected the attendances at Barnoldswick and by the end of the year there had been considerable reductions in both children and staff. The expense of this service will be appreciated when it is pointed out that in the day nurseries in the West Riding the daily cost per child attendance was 16s. 2.9d in 1953 - 54.

(g) CHILDRENS HOMES.

There are two homes in Skipton, Burnside House and Aireview House. They are administered by the Welfare Department, but all children are examined by the Health Department Staff on admission and discharge, and periodically during their stay.

(h) CARE OF THE UNMARRIED MOTHER AND CHILD.

The illegitimate birth rate expressed as a percentage of all live births has now fallen to about half what it was in 1945., i.e., from nearly 10% to under 5%. And the infant mortality rate for the illegitimate is now approaching the rate for the legitimate. These figures give cause for some satisfaction, but the fact remains, that one in every twenty one children born in this country is illegitimate, which in figures means 32,503 illegitimate children born in 1953. (Figures quoted from "The Report of the Ministry of Health, 1953"). A proportion of these will be legitimized on marriage, but there must be many children born every year under conditions which may ultimately lead to grave personal and social difficulties.

This Division has its share of illegitimate births, unfortunate victims of human frailty, and admission to hostel or home for confinement and for a period thereafter has been arranged when requested. The County Council provides financial assistance in such cases, and much practical help has been provided by the Bradford Diocesan Moral Welfare Council. Some babies have been adopted, for which there is a demand; but in many cases there exist problems of moral and social rehabilitation which are most difficult to solve, even with the full co-operation of all statutory, voluntary and denominational bodies.

(a) BIRTHS:

The total number of domiciliary confinements was 131 compared with 710 in hospital, giving a percentage of 12. The proportion of hospital confinements varies greatly in this country, ranging from 34% to 91%, with an average of 64%; whilst the Ministry of Health estimate that hospital provision is necessary on medical and social grounds in about half the confinements.

In this Division it has not been necessary to refuse a bed to a single applicant for several years past. Maternity homes are expensive units, and if the Ministry's recommendation was adopted, the reduction in financial expenditure would be great; and many women would willingly have their babies at home who now go into hospital beds which are so freely available.

(b) ANTE-NATAL CLINICS:

Attendances at the existing ante-natal clinics continued at a satisfactory level. At these clinics all patients have blood taken for Rhesus and Kahn testing, and haemoglobin estimation. Weighing, urine testing and blood pressure readings are carried out at every visit. Furthermore, patients are encouraged to discuss health matters and preparations for the confinement with the doctor, health visitor and midwife, and to attend the relaxation exercise classes which are provided at two clinics.

(c) CHILD WELFARE CENTRES:

Details of centres and attendances are given in table form. The mobile centre has continued to operate on two days each fortnight, providing a service for mothers and children living in less accessible places, and the village of Bradley was added to its itinerary during the year.

Assistance at the static centres has again been provided by members of the Voluntary Committees, and we are greatly indebted to these ladies for their continued support.

(d) DENTAL CARE:

The County Council has one dental clinic in this Division, at Barnoldswick. The Senior Dental Officer has been able to offer free treatment to all expectant and nursing mothers referred to him from the Earby and Barnoldswick clinics, whilst in other parts of the Division local dental practitioners have continued to provide a service under the County Council's scheme.

(i) WELFARE FOODS SCHEME.

During the year the Local Health Authority took over the distribution of dried milk, cod liver oil, orange juice and vitamins from the Ministry of Food. This involved a great deal of work at short notice, and distribution centres were established at Skipton, Silsden, Crosshills, Earby, Barnoldswick, Gargrave and Grassington. In addition, cod liver oil and orange juice are distributed through voluntary agencies at Appletreewick, Linton, Addingham, Sutton, Farnhill, West Marton, Lothersdale, Cowling and Kettlewell.

(5) MIDWIFERY SERVICE.

Two whole time midwives have been employed, and eight home nurses also undertake domiciliary midwifery in the more rural areas. These members of the staff are trained to give gas and air analgesia during childbirth, conducting normal deliveries as independent professional practitioners with a doctor available when required. They also give pethidine, and will be trained to give trilene. The fear that the era of the midwife's independence might be coming to an end thus seems unfounded.

STATISTICS:

Number of confinements in the Divisional area attended by midwives:-

| | Institutional Total No. of cases. | Domiciliary Cases. | | | |
|---|---|---|---|---|---|
| | | Dr. not booked. Dr. present at time of delivery of child. | Dr. booked. Dr. not present at time of dly. of dlvy. | Dr. present at time of dly. (either booked Dr. or another). | Dr. not present at time of dly. of child. |
| Midwives employed by the Authority | - | - | 6 | 42 | 79 |
| Midwives employed by Voluntary Organisations | - | - | - | - | - |
| Midwives employed by Hospital Management Committees. | 523 | - | - | - | - |
| Midwives in Private Practice: | | | | | |
| (a) Nursing Homes | - | - | - | - | - |
| (b) Others | - | - | - | - | - |

6. HOME NURSING.

To-day most cases of acute illness go to hospital, and the work of the home nurses may be divided into three categories - (i) minor ailments and injections; (ii) post-operative and other cases discharged from hospital, and (iii) the chronic sick and the dying.

Much of their work falls into the last category, and along with it many duties which are not strictly nursing, but which have so often to be undertaken because the sick and aged have no relatives to assist them. There is no limit to the demands which may be made upon the nurses, for whilst hospitals may set a limit to the number of patients they will admit, the nursing of cases requiring admission (particularly the long-term sick) inevitably falls on the home nurse, often under difficult and deteriorating conditions. Fortunately this work is fully appreciated, and it has never been necessary to refuse a call upon the five whole-time nurses, and the eight home nurse/midwives who have been employed during the year.

Mobility is obviously of the greatest importance if this service is to be sustained, and the standard of care continued. The majority of nurses have their own cars, perhaps acquired under the assisted purchase scheme. Three nurses run cars owned by the County Council, and only two are without transport.

A summary of the work undertaken by the home nurses is as follows:-

| | | |
|------|---|----------------|
| (i) | Number of visits paid by home nurses during the year | 35,933. |
| (ii) | Number of cases attended by home nurses during the year (excluding midwifery and maternity cases) | 2,258. |

7. HEALTH VISITING.

It is not generally appreciated that health visitors are also qualified midwives and nurses, and the important contribution which can be made to the health of the community by individuals with such training is only now being realised.

Under the provisions of the National Health Service Act, the health visitor is provided for home visiting, for the purpose of giving advice as to the care of young children, persons suffering from illness, and expectant or nursing mothers, and as to the measures necessary to prevent the spread of infection.

Here, they are also employed as school nurses, and tuberculosis health visitors, so that each has an area (usually with a clinic as well) in which she can employ her knowledge and skill amongst the families, and which become very well known to her.

A valuable part of her work is the teaching of health in these homes, but she can give much assistance either on her own initiative or to the family doctor in cases of feeding difficulties in infancy, the supervision of the aged, and the welfare of the tuberculous and the disabled. She can also provide information for hospitals which would otherwise be difficult or impossible to obtain, and so materially assist in the patients treatment.

The health visitors investigations into the fate of certain premature babies, and of the effect of virus diseases in pregnancy have been continued.

STATISTICS:

Number of visits paid by health visitors during the year in addition to their attendance at clinics and welfare centres:-

| | <u>First Visits:</u> | <u>Total Visits:</u> |
|-----------------------------------|----------------------|----------------------|
| (i) Expectant Mothers | 176 | 482 |
| (ii) Children under 1 yr. | 806 | 6,122 |
| (iii) Children between 1 & 5 yrs. | - | 8,450 |
| (iv) In respect of Tuberculosis | - | 1,008 |
| (v) Other cases | - | 1,815 |
| | <u>982</u> | <u>17,877</u> |

8. HOME HELP SERVICE.

If a census could be taken of the benefits which have been derived from the National Health Service Act, there is no doubt that this service would take a high place in the order of appreciation, particularly in an area such as this where there has been no unemployment, and the employment of women in the mills is traditional.

Families are in general much smaller than they used to be, and they move about the country more. Members are, therefore, not available to help their sick or aged relatives, and the demands on the home help service increase year by year.

In such circumstances, the home help is employed to do everything which falls to the lot of the housewife, including cooking, cleaning, washing and the care of children. Alternatively, she may attend the aged to do the heavier work for a few hours each week. Or attend other cases for such time and duties as their circumstances require. During most weeks between 80 and 100 individuals or families have been provided with whole time or part time help, and the clerical and administrative work involved in this provision is considerable.

Cases provided with home helps during the year came within the following classifications:-

| | | <u>No. of cases.</u> | <u>Hours employed.</u> |
|--------|---|----------------------|------------------------|
| (i) | Maternity (incl. expectant mothers) ... | 54 | 4,698 |
| (ii) | Tuberculosis ... | 4 | 762 |
| (iii) | Chronic sick, incl. aged and infirm ... | 253 | 37,531 |
| (iv) | Others ... | 9 | 2,984 |
| Total: | | <u>320</u> | <u>45,975</u> |

9. MENTAL HEALTH SERVICE.

The functions of the Local Health Authority under existing legislation are as follows:-

- (a) The appointment of duly authorised officers to take initial proceedings for removal to hospital of persons who are to be dealt with under the Lunacy and Mental Treatment Acts.
- (b) The duty under the Mental Deficiency Acts 1913 - 18 of ascertaining what persons in the area are defectives; providing suitable supervision for them, guardianship, or institutional care; and making arrangements for the provision of suitable training or occupation for defectives not in institutions.
- (c) The duty to make arrangements for the care and after-care of persons suffering from mental illness or mental defectiveness, so far as provision is not otherwise made.
- (d) The provision of an ambulance service for the purpose of the mental health service.

Under the terms of paragraph (a) the Duly Authorised Officer has dealt with the following cases during the year:-

| | | |
|-------|--|----|
| (i) | Number of cases certified under Section 16 of the Lunacy Act, 1890 | 18 |
| (ii) | Number of cases dealt with under Section 20 | - |
| (iii) | Number of cases dealt with under Section 21 | - |
| (iv) | Number of cases in which authorised officers have assisted in obtaining admission under Section 1 of the Mental Treatment Act | 1 |
| (v) | Cases dealt with under Section 5 of the Mental Treatment Act | 1 |
| (vi) | Any other cases referred to the authorised officer for action, but where it was not found necessary to proceed under the Lunacy or Mental Treatment Acts | 4 |

These figures may not appear to be large, but they refer to a comparatively small population, and the fact remains that a majority of the hospital beds in this country is devoted to the institutional care of the mentally sick, and there is need for more. 5,000 additional beds in mental and deficiency hospitals have been provided since 1948., and capital works authorised will provide another 7,000. This provision should go some way towards reducing the overcrowding, and the long waiting lists.

The majority of mental defectives are now brought to notice through the School Health Service, being found unable to benefit from education in an ordinary school or special school. Occasionally elderly defectives are notified who have been cared for by relatives until old age or ill health prevents their continuing this care.

During the year 1954., 12 new defectives were discovered, 11 of whom were under 16. At the end of the year there were 65 mental defectives resident in the Division, of whom 14 were under 16. 51 had been placed under Statutory Supervision, 11 were under voluntary supervision, and one was on licence from an institution. In addition, 56 defectives whose home addresses are in the Division were receiving institutional care.

The Mental Health Social Worker visits defectives in Divisions 1 and 2 who are looked after by their parents or relatives, and who may be working under supervision in various occupations. She gives advice and assistance, particularly over difficulties which may arise. Reports are also submitted by her to mental hospitals on patients who are on licence or being considered for holiday leave.

The social worker may visit occasionally patients who have returned home after hospital treatment for mental or nervous breakdown, but this after care, which is often so desirable, has developed slowly in these parts, and lack of staff prohibits its expansion.

Mental defectives who can benefit by occupational therapy and training receive this from a Home Teacher who conducts a Group Training Centre in Skipton on three days each week. On the other days the teacher visits the homes of some who cannot travel to the Centre.

There are 12 children on the register of this Centre. Dinners are provided through the School Meals Service, and travel warrants for the defectives and their escorts. This service is greatly appreciated by the parents, for the training is valuable, and they are relieved of the strain of looking after their defective children for a proportion of each week.

10. VACCINATION AND IMMUNISATION.

Under the National Health Service Act the Local Health Authority has a duty to make arrangements for persons in its area to be vaccinated against smallpox and immunised against diphtheria. Vaccination and immunisation are, therefore, offered to the parents of all babies, and if desired are carried out by the family doctor or at any child welfare centre. Immunisation is again offered when the child reaches school age. The elimination of diphtheria is conditional upon the maintenance of an adequate level of immunisation, the objective being the immunisation of not less than 75% of babies before their first birthday. Unfortunately, both national and local figures are far below that target, and if parents continue to leave their children unprotected, there may be a return of diphtheria outbreaks as has occurred recently in the Midlands where among 78 cases there were 6 deaths - all of them children who had not been immunised. Parents might also bear in mind that as recently as 1944., there were 23,199 notified cases of diphtheria with 934 deaths.

Smallpox occurred in Lancashire and Yorkshire in 1953. It caused alarm, and the number of vaccinations increased. But parents soon became apathetic once the epidemic was eradicated, and less than one third of babies are now being brought forward for this procedure.

Whooping cough was made a notifiable disease in 1940. Since then it has been stated that well over one million cases have been notified in England and Wales alone, and over 10,000 children have died from the disease. Of the survivors a proportion will be left with permanent lung damage. It is estimated that 70% of the child population must be immunised before whooping cough can be eliminated as a major infectious disease, and it is now firmly believed that a high degree of immunity, even if it falls short of complete protection, can be provided by three injections given at monthly intervals starting at the fourth or fifth month of life.

STATISTICS:

(a) Number of persons vaccinated (or re-vaccinated) during period:-

| Age at date of vaccination | Under 1 yr. | 1 yr. | 2-4 yrs. | 5-14 yrs. | 15 yrs. or over | Total. |
|----------------------------|-------------|-------|----------|-----------|-----------------|--------|
| Number vaccinated | 283 | 12 | 28 | 152 | 268 | 743 |
| Number re-vaccinated | - | - | 3 | 87 | 253 | 343 |

(b) Number of children who completed a full course of primary immunisation against diphtheria during the year.

| Age at date of final injection. | | |
|---------------------------------|----------|--------|
| Under 5. | 5 to 14. | Total. |
| 642 | 135 | 777 |

(c) Number of children who were given a secondary or reinforcing injection (i.e., subsequent to complete full course) during the year ... 773.

(d) Number of children who completed a full course of immunisation against whooping cough during the year:-

| Age at 31. 12. 54. i.e. born in year. | Under 1 1954 | 1 1953 | 2 1952 | 3 1951 | 4 1950 | 5 1949 | Total |
|--|--------------------|-----------|-----------|-----------|-----------|-----------|-------|
| Number immunised | 63 | 218 | 38 | 11 | 12 | 1 | 343 |

11. HEALTH EDUCATION.

There is such a mass of propaganda to-day on such a wide variety of subjects that much of it must fail in its objectives. Health propaganda by advertisement, pamphlet and poster must obviously share in this high proportion of failure, and although all are used, much more reliance is placed upon the personal approach, and in-group teaching.

The health visitors are in a very good position to deal with this subject when making their visits, and can advise on mothercraft, home management, the prevention of disease and accident, and the upbringing of children. Their advice is particularly important where there are cases of tuberculosis in the home.

At the ante-natal relaxation exercise classes the health visitors share the instruction with the midwives, giving informal talks on mothercraft to the most receptive of audiences. This year it has been possible to enlarge our field of work, and film strips and talks on child care and development have been given at child welfare centres. Film strips and talks have also been given in a number of senior schools. Despite what is being done it is obvious that we are still only dealing with a small part of this enormous problem of healthy living - for that is what we really mean. And until more can be done - much more - there seems little prospect of reducing the nations enormous bill for ill health and preventable disease.

12. CHILDREN NEGLECTED OR ILL-TREATED.

The Divisional Medical Officer is responsible for co-ordinating the activities of public and voluntary bodies engaged in the prevention of neglect or ill-treatment of children in their own homes. To this end conferences are held regularly, and attended by all who have an interest in the welfare, education and housing of these families. A great deal of information is thus made available for those workers and their activities can be co-ordinated to the best advantage in dealing with problem families, and others who may be brought to notice in one way or another.

Rehabilitation of such families is a difficult business, and we have no Family Service Unit to work in their homes. But some results have been achieved, and the conferences are of undoubted value. In this respect the services of the local inspector of the N.S.P.C.C. have been greatly appreciated.

13. CARE AND AFTER CARE.

There is a wide field of responsibility for the Local Health Authority and references must necessarily be brief. Sick room requisites in the form of air rings, rubber sheets, bed pans and bed rests have been provided free of charge, each home nurse holding a small stock. Crutches, wheel chairs, spinal carriages, special beds and other larger items being supplied through the Divisional Office. Recuperative Home Treatment has been arranged for certain adults on their doctor's recommendation, and a few children have been admitted to convalescent homes through the School Health Service. Extra milk has been supplied to 35 cases of tuberculosis during the year, on the advice of the Chest Physician.

The exchange of information between the Almoners and this Division has shown a considerable increase, home nurses and home helps being provided at their request for patients discharged from hospital. Information on social conditions has also been provided, and many reports on the circumstances of applicants for admission to hospitals for the long-term sick.

Much attention has been given to the ageing population in one form or another. Ageing by virtue of the fact that instead of the high fertility of the nineteenth century, there is now a lower level of fertility, and the continuous expansion of population has been replaced by a more stable structure in which the proportion of old people is no longer artificially low. Additionally, the great reduction in mortality, particularly amongst infants and from infections, means that many people are now living into old age which, until recent times they would never have reached. The majority of old people manage surprisingly well, but if they fall ill and require nursing, it is always difficult to obtain a hospital bed on the female side. The provision of a "half way house", the joint responsibility of Regional Hospital Board and Local Health Authority would meet the needs of some such cases of temporary illness. It would also meet the needs of many others - e.g., those no longer requiring hospital treatment, but not fit to manage in their own homes or in an old peoples' home, sometimes referred to as the 'frail ambulants'.

14. AMBULANCE SERVICE.

There has been no alteration in the ambulance arrangements during the year, and judging from comment and absence of complaint, it would seem that a satisfactory service is being provided.

The Barnoldswick depot serves West Craven; Silsden and adjacent parishes are served from Keighley; Addingham and Beamsley from Guiseley; and the rest of the Division from the Skipton depot, with the exception of Upper Wharfedale which is dealt with by the St. John's Ambulance Brigade operating under agency arrangements from Grassington.

STATISTICS:

1954

Mileage covered: 139,868

Patients carried: 18,449

15. THE SCHOOL HEALTH SERVICE.

The responsibilities of the department in respect of schools have continued without interruption. The basis is the examination of each child on at least three occasions during school life along with special examinations of those children who need particular observation or care, and the provision of guidance to the Youth Employment Officer when the time comes for pupils to leave school. In addition, B.C.G. vaccination has been offered since September to all children in the thirteen year old group. The purpose of this is to provide children with an artificial immunity who are shown by skin testing to be susceptible to tuberculosis. The results of this are given in the table below, and further reference will be found in an earlier section of this Report.

The tuberculin testing of school entrants has also been extended. This consists of applying a little specially prepared jelly to the skin, and in the case of a child showing a positive reaction, search is made amongst the family contacts to try and find the source of infection. This is done with the co-operation of the Chest Physician, and is a means of discovering hitherto undetected but infectious cases of tuberculosis in the community.

B.C.G. vaccination, and the tuberculin testing of school entrants have involved the staff of the department in much extra work. But it has been willingly undertaken and accomplished in the belief that these procedures will eventually lead to a reduction in the incidence of tuberculosis.

During the year two teachers were found to be suffering from pulmonary tuberculosis. All contacts were given a tuberculin test, the results of which indicated that there had been no widespread dissemination of the disease.

The free provision of a general practitioner service (under the National Health Service Act) for every child has had little effect so far on the School Health Service, and co-operation between the doctors concerned is in most instances satisfactory. Co-operation with the hospital staffs has also improved. That is as it should be, for all are workers in the same health service; and as there are still 20% of men medically examined on registering for national service found to be unfit for service on medical grounds, then there is obviously a need for the fullest co-operation in this wide field of child health.

TABLE I.

(a) PERIODIC MEDICAL INSPECTIONS.

Number of inspections in the prescribed groups:-

| | |
|----------------------|---------------------|
| Entrants | 946 |
| 7 to 8 year group | 13 |
| Last year primary | 748 |
| First year secondary | 143 |
| Last year secondary | <u>416</u> |
| Total: | <u><u>2,266</u></u> |

(b) OTHER INSPECTIONS.

| | |
|-------------------------------|---------------------|
| Number of Special Inspections | 1,286 |
| Number of Re-inspections | <u>25</u> |
| Total: | <u><u>1,311</u></u> |

(c) PUPILS FOUND TO REQUIRE TREATMENT.

| Group | Defective vision(excl. squint) | For any of other conditions recorded in Table 11A | Total individual pupils |
|---------------------|--------------------------------|---|-------------------------|
| Entrants | 22 | 231 | 230 |
| 7 to 8 yr. group | 1 | 3 | 4 |
| Last yr. primary | 61 | 169 | 205 |
| First yr. secondary | 13 | 19 | 27 |
| Last yr. secondary | 25 | 99 | 112 |
| Total: | 122 | 521 | 578 |

(d) CLASSIFICATION OF THE GENERAL CONDITION OF ALL PUPILS
GIVEN A ROUTINE EXAMINATION.

| Age Groups. | No. of pupils inspect- ed. | A. (Good) No. % of Col.2. | B. (Fair) No. % of Col.2. | C. (Poor). No. % of Col.2. |
|------------------------|-------------------------------------|---------------------------------|---------------------------------|----------------------------------|
| Entrants | 946 | 552 58.4 | 368 38.9 | 26 2.7 |
| 7 to 8 yr. group | 13 | 8 61.5 | 4 30.8 | 1 7.7 |
| Last yr. primary | 748 | 492 65.7 | 231 30.8 | 25 3.5 |
| First yr. secondary | 143 | 99 69.2 | 44 30.8 | - - |
| Last yr. secondary | 416 | 280 67.3 | 126 30.3 | 10 2.4 |
| Total: | 2,266 | 1,431 63.1 | 773 34.1 | 62 2.8 |

TABLE 11

(e) RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1954.

All defects noted at medical inspection as requiring treatment are included in this return, whether or not this treatment was begun before the date of the inspection.

| Defect or Disease. | Periodic Inspections. | | Special Inspections. | |
|-----------------------|-----------------------|---|----------------------|---|
| | No. of Defects. | | No. of Defects. | |
| | Requiring treatment | Requiring observation but not treatment | Requiring treatment | Requiring observation but not treatment |
| Skin | 69 | 6 | 11 | 7 |
| Eyes: (a) Vision | 122 | 114 | 46 | 108 |
| (b) Squint | 30 | 9 | 8 | 11 |
| (c) Other | 20 | 5 | 2 | 3 |
| Ears: (a) Hearing | 2 | 7 | 3 | 7 |
| (b) Otitis Media | 11 | 8 | 3 | 6 |
| (c) Other | 6 | 8 | 7 | 8 |
| Nose or Throat | 81 | 147 | 50 | 92 |
| Speech | 14 | 9 | 8 | 14 |
| Cervical Glands | 5 | 18 | 4 | 20 |
| Heart and Circulation | 5 | 52 | 3 | 68 |
| Lungs | 62 | 46 | 15 | 48 |
| Developmental: | | | | |
| (a) Hernia | 7 | 2 | 1 | 4 |
| (b) Other | 15 | 60 | 8 | 40 |
| Orthopaedic: | | | | |
| (a) Posture | 18 | 44 | 9 | 21 |
| (b) Flat Feet | 94 | 33 | 29 | 32 |
| (c) Other | 34 | 23 | 12 | 40 |
| Nervous System: | | | | |
| (a) Epilepsy | - | 2 | - | 6 |
| (b) Other | 5 | 5 | - | 7 |
| Psychological: | | | | |
| (a) Development | 2 | 12 | 1 | 32 |
| (b) Stability | 5 | 25 | 3 | 14 |
| Other | 52 | 15 | 9 | 22 |

(f) B.C.G. VACCINATION OF SCHOOL CHILDREN.

| | |
|-----------------------------------|-----|
| Number offered B.C.G. Vaccination | 501 |
| Number accepting B.C.G. | 316 |
| Number Mantoux Negative | 179 |
| Number given B.C.G. Vaccine | 179 |

(g) CLINIC ARRANGEMENTS:

School clinics are held in Skipton, Silsden and Barnoldswick where children requiring observation can be seen regularly, and given appropriate treatment and advice. Orthopaedic and Ear, Nose and Throat clinics are held at Skipton Hospital, conducted by specialists of the Regional Hospital Board. The Board also provides an ophthalmologist for the examination of children with defects of vision, and his clinics are held in Skipton and Barnoldswick. Clinics are held in the same places for speech therapy, Miss Buckley's services being shared with Divisions 1 and 3. Last, but by no means the least important is the Child Guidance Clinic conducted by Dr. MacTaggart for children showing maladjustment and behaviour problems.

(h) HANDICAPPED PUPILS:

There are 71 names on the register of handicapped pupils, these being pupils who, owing to some mental or physical disability, require special educational treatment. The division into the various categories being:-

| | | | | | |
|-------------------|---|----------------|----|---------------|----|
| Blind | 3 | Partially Deaf | 3 | Physically | |
| Partially sighted | 2 | Maladjusted | 1 | Handicapped | 16 |
| Deaf | 5 | Delicate | 13 | Educationally | |
| | | | | Subnormal | 28 |

Total: 71

Of these 71 pupils, 23 were attending special residential schools as follows:-

| | | | |
|-------------------------------|---|---------------------------|---|
| Schools for the Blind | 1 | Schools for Maladjusted | 0 |
| Schools for Partially sighted | 2 | Schools for Delicate | 4 |
| Schools for the Deaf | 4 | Schools for Physically | |
| Schools for Partially Deaf | 1 | Handicapped | 3 |
| | | Schools for Educationally | |
| | | Subnormal | 8 |

Total: 23

5 children were receiving home tuition during the year.

(i) PUPILS UNDER OBSERVATION.

In addition to the pupils classified as handicapped under the Education Act, 1944, 57 children with defects of a less serious or temporary nature were under observation at the end of the year.

(j) EMPLOYMENT OF CHILDREN.

The County Council has Byelaws relating to the employment of children, of compulsory school age, which require the children to be examined by the School Medical Officer within two weeks of the date when employment begins. This being to ascertain that such employment will not be prejudicial to the child's health. During the year 35 children were examined for this purpose.

(k) CLEANLINESS.

The school nurses undertake the examination of childrens' heads for infestation with vermin. During the year 20,255 examinations were made, and 203 pupils found to require treatment. In many cases the infestation is a chance one, and does not recur, but in a few families where there is neglect or lack of care, treatment is undertaken in co-operation with the parents and teachers.

(l) DENTAL SERVICE.

The following statistics have been provided by Mr. O.A. Long, Senior Dental Officer. Treatment has been on a reduced scale, because of the absence of Mr. Ellwood on a year's study leave in the U.S.A.

| | | | | |
|------------------------------|---|-----|----------------------------|-------|
| Number of children inspected | | | | 2,517 |
| " | " | " | found to require treatment | 2,005 |
| " | " | " | offered treatment | 1,683 |
| " | " | " | treated | 1,458 |
| " | " | | attendances | 3,322 |
| " | " | | extractions: | |
| | | (a) | temporary | 1,666 |
| | | (b) | permanent | 288 |
| " | " | | general anaesthetics | 9 |

Number of fillings:

| | |
|---------------|-------|
| (a) temporary | 648 |
| (b) permanent | 2,167 |

Number of other treatments:

| | |
|---------------|-------|
| (a) temporary | 207 |
| (b) permanent | 1,192 |

16. MEDICAL EXAMINATIONS.

Particulars of medical examinations carried out by the Divisional Medical Staff are as follows:-

| | |
|---|----------|
| Entry to County Superannuation Scheme | 35 |
| Teachers and entrants to Training College | 36 |
| Fitness for work | 6 |

In addition certain examinations were carried out under the Children Act, 1948., and the Mental Deficiency Acts.

